118000020773

(Requestor's Name)
(Address)
(Äddress)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600316999496

08/15/18--01006--034 **35.00

18 AUG 15 PM 1: 42

N COOPER AUG 2 0 2018

COVER LETTER

TO:

TO:	Registration Sec Division of Corp			
eno ne		FING CONTRACTORS LLC		
SUBJE	UI:	Name of Limi	ted Liability Company	
The enc	losed Articles of .	Amendment and fee(s) are subt	mitted for filing.	
Please r	eturn all correspo	ndence concerning this matter	to the following:	
		Derek Newcomer		
			Name of Person	
		APEX ROOFING CONTR	ACTORS LLC	
			Firm/Company	
		4315 53rd Ave East		
		·	Address	
		Bradenton, FL 34203		
			City/State and Zip Code	
		Derek@apexengineer.com	to be used for future annual report notif	Tantian 1
For furt	her information c	oncerning this matter, please co		eattern)
		omeering this matter, presse et		
Derek i	Newcomer —	<u></u>	at ()	
	Name o	f Person	Area Code Daytime	e Telephone Number
Enclose	d is a check for th	ne following amount:		
■ \$25	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Registr Divisio	ING ADDRESS: ration Section on of Corporations ox 6327	STREET/COURI Registration Sectio Division of Corpor Clifton Building	n

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Apex Roofing Contractors LLC			
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears o iited Liability Company)	n our records.)	
The Articles of Organization for this Limited Liability Comp.	pany were filed on 1/23/	2018	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	liability company here	:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the design	gnation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES.	<u>S)</u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			SECRETARY OF STATE VISION OF CORPURATION 8 AUG 15 PM 1: 42
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		our records, <u>enter t</u>	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florido	a street address	
		, Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Registered Ag	gent:		

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

. If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Derek Newcomer	4315 53rd Ave East, Bradenton FL	
			□ Remove
			☐ Change
			Add
			Remove
			Change
			Add
		<u></u>	Remove
			Change
			□ Remove
			Change
_			Add
			Change
			Remove
			☐ Change

							-
				. <u>.</u>			_
					_		_
							_
				<u> </u>			-
							_
· · · · · · · · · · · · · · · · · · ·				·		_	_
							-0
						5	VS.
		· · · · · · · · · · · · · · · · · · ·				AUG	-25.
						5	_유
						- 32	020
							ŏĸ.
		_ _ _				1: 42	-410H
				-		~	_ _ =
							_
							
Effective date, if o	ther than the date o	f filing:		(optional)		
If an effective date is lis Note: If the date ins	ted, the date must be spec erted in this block doc	rific and cannot be prior is not meet the applic	r to date of filing or cable statutory fil	more than 90 days ing requirements	after filing.) Purs , this date will	suant to 6 not be li	05.02 sted
document's effective	date on the Departme	ent of State's records	,	-			
	es a delayed effec		ot an effective	time, at 12:0	01 a.m. on t	he ear	lier
	fter the record is						
	///	2018					
<i></i>	10	,	_·		-	٠.	
Dated 5/	-/			<i>/</i>			
Dated \$\int \begin{aligned}	./						

Page 3 of 3

Filing Fee: \$25.00